<ol> <li>NATIONAL UNION FIRE INS CO OF PITTSBURGH, (the "Insurer"), (Name of Insurer)</li> </ol>
of 70 PINE ST., NEW YORK, N.Y. 10270 hereby (Address of Insurer)
certifies that it has issued liability insurance covering bodily injury and property damage to K <u>. S. PROCESSING CO.</u> ,(the (Name of Insured)
"insured"), of <u>201 W 10TH ST., MARCUS HOOK, PA 19061</u> (Address of Insured)
in connection with the insured's obligation to demonstrate financial responsibility under 40 CFR 264.147 or 265.147. The coverage applies at: A. SAME AS ABOVE: EPA #PAD980691737
C(EPA Identification #, name, and address of facility)
for sudden accidental occurrences. The limits of liability are primary and the company shall not be liable for amounts in excess of $\frac{1.000.000}{0.000}$ for each occurrence and annual aggregate limits of $\frac{1.000.000}{0.000}$ , exclusive of legal defense costs. The coverage is provided under policy number $\frac{59952116}{0.000}$ , issued on $\frac{6/30/83}{0.000}$ .
The limits of liability are excess and the company shall not be liable for amounts in excess of \$ea occ\$agg. exclusive of defense costs. The coverage is provided under policy numberissued on (Date)
2. The Insurer further certifies the following with respect to the insurance described in Paragraph 1:

(a) Bankruptcy or insolvency of the insured shall not relieve the Insurer of its obligations under the policy.

· .

- (b) The Insurer is liable for the payment of amounts within any deductible applicable to the policy, with a right of reimbursement by the insured for any such payment made by the Insurer. This provision does not apply with respect to that amount of any deductible for which coverage is demonstrated as specified in 40 CFR 264.147(f) or 265.147(f).
- (c) Whenever requested by a Regional Administrator of the U.S. Environmental Protection Agency (EPA), the Insurer agrees to furnish to the Regional Administrator a signed duplicate original of the policy and all endorsements.
- (d) Cancellation of the insurance, whether by the Insurer or the insured, will be effective only upon written notice and only after the expiration of sixty (60) days after a copy of such written notice is received by the Regional Administrator(s) of the EPA Region(s) in which the facility(ies) is(are) located.

(e) Any other termination of the insurance will be effective only upon written notice and only after the expiration of the thirty(30) days after a copy of such written notice is received by the Regional Administrator(s) of the EPA Region(s) in which the facility(ies) is(are) located.

I hereby certify that the wording of this instrument is identical to the wording specified in 40 CFR 264.151(j) as such regulation was constituted on the date first above written, and that the Insurer is licensed to transact the business of insurance, or eligible to provide insurance as an excess or surplus lines insurer, in one or more States.

(Signature of Authorized Representative of Insurer)

GAIL E. LAMPARTER: ENVIRONMENTAL COMPLIANCE SERVICES (Type Name of Representative)

<u>UNDERWRITER</u> Authorized Representative of <u>NATIONAL UNION FIRE</u> (Title) (Name of Insurer)

INSURANCE CO OF PITTSBURGH ; 70 PINE ST., NEW YORK, N.Y. 10270
(Address of Insurer)

RECEIVED
Facilities Management Section

AUG 1 7 1983

U.S. EPA, Region III

2500-FM-LRWM0276 Rev. 5/99



# COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF LAND RECYCLING AND WASTE MANAGEMENT

Inspection Date	1/4/1
Time Start	
Time Finish	

# HAZARDOUS WASTE INSPECTION REPORT GENERATOR GENERATOR

	•		
Company name _ /< . S	. Processing	I.D. Number	D 98069173°
Site Address 201	East 10th ST.; Man	res Hook, PA	
County Delaware	Municipality Marw's	Hook Boro Zip_	19061
Name of Inspector Pa			
Name & Title of Respons	ible Official wilfort Carroll		· .
Person Interviewed 5 A	ent from above) P.O. Rox 385,	Telephone ( <u>6/0</u> )	494-5301
Mailing Address (if differe	ent from above) P.J. Rox 385,	Pern Aue.	
Amount of Hazardous Wa	aste Generated per Month:	Pounds	Kgs
1. Site Characterization	the same of the same and the sa		
STORAGE: Co	ntainer 🔲 Tanks 🔲 Containment Bldg.	. Drip Pad Other	·
PBR: Nei	utralization/WWTP	Other	-
GENERATOR TREAT	rment ☐ Containers ☐ Tanks	☐ Containment Bldg.	Drip Pad
2. Universal Waste:	Large Quantity Handler Small Qu	antity Handler	
Universal Waste	Types <u>not setud.</u>	·	
3. Hazardous Waste Tr	ansporters: N/A		
Transporter Name	•	License Number	
Transporter Name		License Number	
	waste generated and destination facility (		· · · · · · · · · · · · · · · · · · ·
Waste Code	Waste Description	Destination	on Facility
	NA		

ER-WM.-129: Rev. 10/95

# COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF LAND RECYCLING AND WASTE MANAGEMENT

### **INSPECTION REPORT COMMENTS**

Date of inspection 1/4/01	ldentificat	tion Number_	PAD980691737			
Company/Facility/Site Name	KS Processing (Sa	fety Disposal	System of PA, Inc.	.)		
This routine hazardous waste general permission of facility General Managautoclaves.						
The facility has undergone changes Disposal Systems of PA Inc. is part of	. <del>-</del>		ocessing operated the	facility. The cur	rent operator,	Safety.
This facility does not routinely gene	rate or transport hazar	rdous wastes.			•	
Since this facility does not generate	or manage hazardous	wastes, the K S	Processing EPA ID#	should be closed	l out.	
			•			•
No violations were observed during	this inspection.		•			
	•		•			
		en e				
		·				•
This inspection report is notice of any violations observed during the inspect identified as a result of review of laboratory. This report does not constitute a simmunity from legal action for any violation. Signature by the person interview was shown the report or that a copy was left.  Person interviewed (signature)	ion. Additional notification analyses or Department or order or other appealation noted herein.  Wed does not necessarily fit with the person.	on of violations materials of the label action of the label action of the label with the label action of t	ay be issued concerning Department. Nothing cor ce with the findings on th	either violations natained herein shatis report, but does	oted herein, or	other violations grant or imply
Inspector (signature)				Date	Page	of

Flease print or type	with ELITE type (1	Z Characte &/inch/ iii	the unshaded are	as only.	034	No. 0246-	EPA-UI		
<b>SEPA</b>		ION OF HAZA				CTIONS: If	you receive	ed a pre	printed
INSTALLA- TION'S EPA I.D. NO.					informati through	on on the i it and supp	space at let abel is incom ply the corn	ect, draw	w a line mation
I. STALLATION					complete below bia	and correct ink. If you	ection below t, leave Iten did not rece	ns I, II, ive a pre	and III printed
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LOCATION III OF INSTAL- LATION		to the IN CATION informati	ISTRUCTION  before common requeste the common transfer to the common transfer tran	ONS FOR F completing to deal herein is a Resource C	LING N his form required	OTIFI- n. The by law			
FOR OFFICIAL U	USE ONLY								
c C			COMMENTS						
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FPAD18	69.173	7 1 1 16	3 3 3						
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III. LOCATION C	F INSTALLATION	ON							
	STRE	ET OR ROUTE NUM	BER						•
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	CITY	OR TOWN	<del></del>	ST.	ZIP CODE				
6 MARC		K		P A 1	9061				
IV. INSTALLATI		NO TITLE (last, first,	f int title		BH	ONE NO /	rea code & n	0.1	
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18 16	U E R M A N	N KURT	PRES	I DENT	45 46	5 4 9	61 62	0 6	
V. OWNERSHIP						,			
8 K U R T	SCHEU	E R M A N N	TALLATION'S	LEGAL OWNER					
B. TYPE OF C	OWNERSHIP	VI. TYPE OF HA	ZARDOUS W	ASTE ACTIVITY	(enter "X"	in the app	ropriate bo	x(es)	
tenter the approprie	zie ieiter into oox)	X A. GEN			B. TRANSPO				
F = FEDERAL M = NON-FED		57	AT/STORE/DISI		D. UNDERG				
VII. MODE OF T	RANSPORTATIC	N (transporters on		60	ite hox(es))				
A. AIR	B. RAIL	C. HIGHWAY			HER (specify)				
VIII. FIRST OR S	SUBSEQUENT NO	OTIFICATION							
Mark "X" in the app	propriate box to indi-	cate whether this is yer your Installation's E				ste activity	or a subseque	nt notifi	ication.
AMENDE	D FORM					C. INSTA	LLATION'S	EPA 1.0	). NO.
	NOTIFICATION	B. SUBSEC	QUENT NOTIFIC	CATION (complete	item C)				
IX. DESCRIPTION	N OF HAZARDO	US WASTES			:				
Please on to the rever	rea of this form and	provide the requestes	information						

EPA Form 8700-12 (6-80)

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		W								
IX. DESCRIPTION OF HAZARDOUS WASTES (con	ntinued from front,				13   14   15					
A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.										
F 0 0 5 F 0 0 5	- 26 9	10	23 - 26	23 - 26						
23 - 26 23 - 26 23	- 26	13 - 26	23 - 26	23 - 26						
B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four—digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.										
13   14	- 26 - 21	16 13 - 26 22	23 - 26	18 23 - 26 24						
23 - 26 23 - 26 23 - 26	- 28 27	28	29 26 27	23 - 26						
C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS W stance your installation handles which may be a hazardous	VASTES. Enter the for waste. Use addition	our—digit number from al sheets if necessary.		or each chemical	sub-					
31 32 32 33 - 26 23 - 26 23 - 26 44 3 44 3 32 32 32 32 32 32 32 32 32 32 32 32 3	39	34 3 - 26 40 13 - 26 46	23 - 26 41 23 - 26 47	23 - 26 42 23 - 26 48						
D. LISTED INFECTIOUS WASTES. Enter the four—digit no hospitals, medical and research laboratories your installation	umber from 40 CFR f on handles. Use addi	art 261.34 for each list tional sheets if necessar	ed hazardous waste fro y.	om hospitals, vet	terinary					
23 - 26 23 - 26 23			23 - 26	23 - 26						
E: CHARACTERISTICS OF NON-LISTED HAZARDOUS hazardous wastes your installation handles. (See 40 CFR)	WASTES, Mark 'X' Parts 261.21 – 261.2	in the boxes correspond 4.)	ling to the characterist	ics of non—lister	đ					
☐ 1. IGNITABLE ☐ 2. COR (D001) (D002)	ROSIVE	3. REACTIVE		4. TOXIC						
X. CERTIFICATION  I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.										
EPA Form 8700-12 (6-80) REVERSE	1	TITLE (type or print)		Jan.3.198	13					

I.D. - FOR OFFICIAL USE ONLY

HAZARDOUS WASTE INSPECTION REPORT

Generators - Part A

Closure Inspection

	22
Date of inspection 3-13-86	
Name of inspector Carol Kurky	
Company, installation name KSP www.	naz
Location 201 &. 10th St - Marcu	2 Hook Klevelopment Park
County. Delaware M	unicipality Marcus Look
Identification number PAD980691737	
Name of responsible official Kurt	Scheuermann.
Title_, Own	
Mailing address 201 & 1015 St. Man	cus Hosk Px 19061
Area code and phone no 215 494	4606
Name of person interviewed Frank	Schluermana
le	Same .
Mailing address (if different from above)	.,
Area code and phone no.	
1. Current waste handling method: $N/$	'n_
•	
, a On-site treatment, sto	
b. / On-site / use, / reuse, /	7 recycle, // reclaim
c Off-site treatment, st	orage, /_/ disposal
d. 🖊 Off-site 🖊 use, 🦯 reuse, 🗸	
2. Amount of hazardous waste produced:	the state of the s
a kg./mo	
b kg./yr	MAR I 1865
3. Types of hazardous waste produced by Ha	zardous Waste Number:
_ N/A -	
4. Are hazardous wastes transported off-si	te by the generator? / Yes No

e of Inspect	tion	3-13-8	6				ion Nu	mber P	P98 0	69173
pany, Instal			K.S.	Proce	ssing	·				
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s inspection ironmental findings or ing the inspection results of the theory, conting, contin	Resources, f this ins pection ar laborator	Bureau o spection a se indicat sy analyse	of Solid are shown ed. Vio as and re	Waste Ma n in this olations eview of	nagement report. may also Departme	Any violet discontinuous contractions of the discontinuous contractions of the contrac	ted the lolation of the location of the locati	ne above ons which i upon e Notific	instal h were examinat	lation. uncovere ion of
son Intervi	ewed (sign	nature)		,			Date _			•
spector (sig	nature)	War	CK.	us			Date.	3-	13-	87

## HAZARDOUS WASTE INSPECTION REPORT TSD Facilities - Part A

Date of inspection 3-13-84	Time start 10 30 Time finish
Name of inspector land kur	by '
Company, installation name (Spa	oussing
Location 201 E. 10th St. Mari	ens Sook Development Park
	Municipality Marcus Hock
Identification number PAD 9806917	<del>237</del>
Name of responsible official Lux	Scherermans
Title	my /
Mailing address 201 & 10th Af. 7	
Area code and phone no	- 494 · 4606
Name of person interviewed	Schenermann
Title	" some
Mailing address (if different from above)	
Area code and phone no.	
1. Site characterization:	
a Treatment surface impou	undments,
b.	tanks, 🔀 surface impoundments, 🗁 waste piles
c. Disposal - Dand treatment	,   landfill,   incineration,   thermal treat-
d. 🖾 Use, 🖾 reuse, 🖾 recycle,	reclaim
2. Does the facility generate hazardous	wastes? / Yes No
3. Types of hazardous waste produced by	
$\mathcal{N}$	Hazardous Waste Number:
4. Are hazardous wastes transported off-	
4. Ale mazardous wastes transported orr-	
	MA
	MAR 1 1860

e of Inspection	_ Identification Number_PAD 980691737
pany, Installation Name K5 Procession	Y
inty Wildward - Municipal	ity Marcus Hook.
•	
- Shin in with	en 1-m la clarine
Duposis - to deter	in was for our succ
- pagos - a accor	whe writing facility
- was stu puagin	
	01 115
- IT THE ATIM	of the inspection.
I was defermined	that no hazardon
waste treatment	or disposal is
occurry on si	Te: all waste
has been umou	ed,
*	
<u> </u>	
•	
s inspection report is official notification that vironmental Resources, Bureau of Solid Waste Manage findings of this inspection are shown in this rep	ement, inspected the above installation.
ing the inspection are indicated. Violations may results of laboratory analyses and review of Department	also be discovered upon evenings
theoming, confirming any violations indicated here	sin and listing any additional violations
seon Interviewed (signature)	Date
spector (signature) land flut	- Date. 3-13-86
: /	

#### UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

#### REGION III

#### 841 Chestnut Building Philadelphia, Pennsylvania 19107

SUBJECT: RCRA Inspection

K. S. PROCESSING

DATE: 8/14/85

FROM:

Compliance Officer RCRA Enforcement Section (3HW11)

TO:

File

THRU:

Peter W. Schaul, Chief C.D.T. for P.W. S.

RCRA Enforcement Section (3HW11)

THE STATE IS TAKING ACTION TO RESOLVE THE VIOLATIONS IN THIS

INSPECTION REPORT.

WE WILL MONITOR THE STATE ACTIVITY REGARDING RESOLUTION OF

THESE VIOLATIONS.



# OFFICE OF ENVIRONMENTAL PROGRAMS DEPARTMENT OF HEALTH AND MENTAL HYGIENE

201 WEST PRESTON STREET · BALTIMORE, MARYLAND 21201 · AREA CODE 301 · 粉井 225-5647

TTY FOR DEAF: Balto, Area 383-7555 D:C. Metro 565-0451

Adele Wilzack, R.N., M.S., Secretary

William M. Eichbaum, Assistant Secretary

June 24, 1985

#### CERTIFIED MAIL

K.S. Processing Company
201 East 10th Street
Marcus Hook, Pennsylvania 19061

Dear Sir:

Enclosed you will find a Notice of Violation concerning violations of the Health-Environmental Article and regulations promulgated thereunder, resulting from transportation of Controlled Hazardous Substances.

As you can see by the Notice of Violation, you have the option of prepaying the civil penalty assessment in lieu of appearing for the hearing. If you choose to appear for the hearing, the fact of the violation and the amount of the assessment will be determined by the Hearing Officer.

On April 10, 1984, May 16, 1984, June 20, 1984, and July 17, 1984, October 17, 1984, December 18, 1984, and February 20, 1985, authorized agents of your company did receive for transport from the Uniformed Services University of Health Sciences, located in Bethesda, Maryland to K. S. Processing Company, Pennsylvania, Controlled Hazardous Substances.

On April 10, 1984, June 20, 1984, October 17, 1984, December 18, 1984, and February 20, 1984, authorized agents of your company did receive for transport from the National Naval Medical Research Institute, RSO, located in Bethesda, Maryland to K.S. Processing Company, Pennsylvania, Controlled Hazardous Substances.

In reviewing Pennsylvania Manifest Documents PAA4936024, PAA4936035, PAA4936116, PAA4936256, PAA4936190, PAA4936315, PAB00884903, PAB00884940, PAB00885146, and PAB00885150, PAB00885511, and PAB00885345, it has been noted that these substances were hauled from Maryland to Pennsylvania by a hauler not certified by the State of Maryland to haul Controlled Hazardous Substances as required by Health-Environmental Article, Section 7-249(a)(2), Annotated Code of Maryland, and COMAR 10.51.04.01.C1.

If you have any questions concerning this matter, please communicate with Mr. Harold L. Dye, Jr., Inspector, Hazardous Waste Inspection Team, Waste Management Administration at (301) 225-5731 in Baltimore.

Sincerely,

Ronald Nelson, Director

Waste Management Administration

RN:dl

Enclosure

cc: Donald Swetter, M.D.

William F. Clark, Esquire Richard M. Hall, Esquire Paul T. O'Connell, Esquire

Mr. William Chicca

Mr. John Koontz

Mr. Alvin Bowles

Mr. Arthur Caple

Mr. Harold L. Dye, Jr.

IN THE MATTER OF:

K.S. PROCESSING COMPANY

SERVE ON:

K.S. Processing Company 201 East 10th Street Marcus Hook, Pennsylvania 19061

- \* DEPARTMENT OF HEALTH AND MENTAL HYGIENE
- \* WASTE MANAGEMENT ADMINISTRATION 201 West Preston Street
- Baltimore, Maryland 21201

C-O-85-539

### NOTICE OF VIOLATION

- 1. Whereas, the State of Maryland, Department of Health and Mental Hygiene, Office of Environmental Programs, pursuant to the powers, duties and responsibilities vested in the Secretary of Health and Mental Hygiene by Health-Environmental Article, Sections 1-301 and 7-201 through 7-268, inclusive, Annotated Code of Maryland, and delegated to the Director, Waste Management Administration, has reasonable grounds to believe that K.S. Processing Company has violated Maryland law regarding transportation of Controlled Hazardous Substances.
- 2. Whereas, on April 10, 1984, K.S. Processing Company received for transportation from Uniformed Services University of Health Sciences under Pennsylvania Manifest Number, PAA4936024, 402 pounds of a Controlled Hazardous Substance, namely waste Toluene.

- 3. Whereas, on April 10, 1984, K.S. Processing Company received for transportation from National Naval Medical Research Institute, RSO, under Pennsylvania Manifest Number PAA4936035, ll2 pounds of a Controlled Hazardous Substance, namely waste Toluene.
- 4. Whereas, on May 16, 1984, K.S. Processing Company received for transportation from Uniformed Services University of Health Sciences under Pennsylvania Manifest Number PAA4936116, 151 pounds of a Controlled Hazardous Substance, namely waste Toluene.

  5. Whereas, on June 20, 1984, K.S. Processing Company received for transportation from Uniformed Services University of Health Sciences under Pennsylvania Manifest Number, PAA4936256, 301 pounds of a Controlled Hazardous Substance, namely waste Toluene.

  6. Whereas, on June 20, 1984, K.S. Processing Company received for transportation from National Naval Medical Research Institute, RSO, under Pennsylvania Manifest Number PAA4936190, 100 pounds of a Controlled Hazardous Substance, namely waste
- 7. Whereas, on July 17, 1984, K.S. Processing Company received for transportation from Uniformed Services University of Health Sciences under Pennsylvania Manifest Number, PAA4936315, 126 pounds of a Controlled Hazardous Substance, namely waste Toluene.

Toluene.

- 8. Whereas, on October 17, 1984, K.S. Processing Company received for transportation from National Naval Medical Research Institute, RSO under Pennsylvania Manifest Number, PAB00884903, 151 pounds of a Controlled Hazardous Substance, namely waste Toluene.
- 9. Whereas, on October 17, 1984, K.S. Processing Company received for transportation from Uniformed Services University of Health Sciences under Pennsylvania Manifest Number, PAB 00884940, 302 pounds of a Controlled Hazardous Substance, namely waste Toluene.
- 10. Whereas, on December 18, 1984, K.S. Processing Company received for transporation from National Naval Medical Research Institute, RSO, under Pennsylvania Manifest Number, PAB 00885146, 76 pounds of a Controlled Hazardous Substance, namely waste Toluene.
- 11. Whereas, on December 18, 1984, K.S. Processing Company received for transportation from Uniformed Services University of Health Services under Pennsylvania Manifest Number, PAB00885150, 252 pounds of a Controlled Hazardous Substance, namely waste Toluene.
- 12. Whereas, on February 20, 1985, K.S. Processing Company, received for transportation from National Naval Medical Research Institute, RSO, under Pennsylvania Manifest Number PAB00885511, 50 pounds of a Controlled Hazardous Substance, namely waste Toluene.

- 13. Whereas, on February 20, 1985, K.S. Processing Company received for transportation from Uniformed Services University of Health Sciences under Pennsylvania Manifest Number PAB00885345, 328 pounds of a Controlled Hazardous Substance, namely waste Toluene.
- 14. Whereas, these substances were transported to K.S. Processing Company, Pennsylvania by a hauler not certified by the State of Maryland to haul Controlled Hazardous Substances. These conditions constitute violations of Health-Environmental Article, Section 7-249(a)(2), Annotated Code of Maryland, and of COMAR 10.51.04.01.C1.

Therefore, it is Ordered by the Director of the Waste

Management Administration that K.S. Processing Company shall:

A. Appear at a hearing scheduled for July 12, 1985 at 1:30 p.m. in Conference Room 102, 300 West Preston Street, Baltimore, Maryland 21201, before a Hearing Officer of the Department of Health and Mental Hygiene, Office of Hearings. This hearing is being held under authority of Health-Environmental Article, Section 7-259(a)(3)(i), Annotated Code of Maryland. Your appearance before the Hearing Officer under the authority of Section 7-261(a) constitutes an administrative hearing and you have the rights of any party in a contested case provided by the Administrative Procedure Act, State Government Article, Section 10-201, et. seq., Annotated Code of Maryland.

The Waste Management Administration is seeking a civil penalty in this case of \$12,000.00. However, in lieu of exercising your right to a hearing, you may settle this matter by remitting to the Waste Management Administration a certified check in the amount of \$6,000.00. By doing so, K.S. Processing Company waives its right to a hearing, but does not admit any of the allegations in the Notice of Violation. If settlement is elected, K.S. Processing Company shall by June 28, 1985 submit a certified check in the amount of \$6,000.00, payable to the Office of Environmental Programs, Waste Management Administration.

If you have any questions concerning this matter, please feel free to communicate with Mr. Harold L. Dye, Jr., Hazardous Waste Inspection Team, Waste Management Administration at (301) 225-5731 in Baltimore.

June 20,1985

Nelson, Waste Management Administration

Approved as to form and legal sufficiency this 14th day of

Staff Attorney

	azaidous wasi				***		<u> </u>		4. HANDLE	g 1V0F.
. EPA ID: IP . HANDLER NAME . ADDRESS:	A   D   918   O   619     Ka S Processing Co.   Marcus Hook, Pa	1 12 13 12	l							MAJOR NON-MAJOR
	TAL EVALUATION WHICH FOR THIS REPORT:	<u>/о</u> н,	1 <u>01183</u> D Y							
. TYPE OF EVAL BY THIS REPO	UATION COVERED	EVALUATION INSPECTION RECORD REVIEW SAMPLING INSPECTION SPECIAL INSPEC								Agency
	NATION COVERED BY THIS or only if different from 5):	Н	//				aran bergranaya iyo iyo wa			
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	or of violations	Violation	GWH	C1/PC	Fin. Re	s. P	t. B	Comp.	Sched.	Other
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. ENFORCEMENT	ACTIONS FOR CLASS I VIOLATION	S:	·			· · · · · · · · · · · · · · · · · · ·		· 		
Area of	Type of Action		Date Action		mpliance Da		_		Penalty	
Violation	Taken (circle one	)	laken (mdy)	Sche	duled	Actual		Assessed	1	Collected
Other	Informal WL(NOV) AO Ci	vAc CrimAc	1017183	/	/_	/ /				
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O. COMMENTS:	Nov issued for manifest di-	carpancies (C	lass TIL)							
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11/7/03

In fe

HAZARDOUS WASTE INSPECTION REPORT

Date	of.	inspection	11/16/83	*** · · · · · · · · · · · · · · · · · ·	_Time start_c	T	ime finis	h d
Name	of	inspector_	Polet	Sang'		<b>心</b> 属@	<b>  国IIVVI</b>	E CONTRACTOR CONTRACTOR
Comp	any	nome Let >	K.S. Process	ina C		11/1 10	LO FINAM	
Toca	tion	Ma	rous Hook Der	t. Park	201 8.	Tents	St.	
			elaware					K
			nr PAD9	,				
Name	20	responsible	official	Kurt.	Schowerma	nn.		
		· .		Pres o	. ,			•
Mail	ing	address 2	01 E. 10th St	. Man	ina Hook	, PA -	- 190	61
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• •			A T 2 W W W	11	•			
	•		different from	above)	Adml.	·		
		de and phone			11			
		Lat.	waste transporte	r (HWT) li	cense number	AHSOC	3	
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3.	มดย		porter denerate h					
4.	ሆያ!	os of hazar	tous waste product UZ2		irdou <b>s</b> Wasto (	Numbor:	:	•
,	•		U2 39					

Are hazardous wastes transported into the Commonwealth from abroad? Yes No

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inspection report is informental Resources, B findings of this inspe- ing the inspection are ultra of laboratory anal ing, confirming any vio	ureau of So ction are s indicated. yses and re	lid Waste hown in th Violation view of De	Management is report. is may also partment r	, inspected Any viola be discove ecords. No	the above insta- tions which were red upon examina tification will	llation, uncovered tion of the be forth-
:Interviewed (signat	V 1/	1///	eurnin		te ////4/	۲۲)
pertur (signature)	Robert	Bang		Da	111	3

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### UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

Region III - 6th & Walnut Sts. Philadelphia, Pa. 19106

SUBJECT: RCRA Inspection K.S. Processing Co., Marcus Hook, Pa. PAD 980691737

DATE:

FROM: Of Gregory A. Koltonuk, Environmental Scientist RCRA Enforcement Section (3HW11)

TO:

**File** 

Thru:

ent Section (3HW11)

BASED UPON A REVIEW OF THE RCRA INSPECTION REPORT FOR THE FACILITY

REFERENCED ABOVE, I HAVE DETERMINED THAT NO FURTHER ACTION IS

REQUIRED AT THIS TIME.

## HAZARDOUS WASTE INSPECTION REPORT Transporters - Part A

Cl b	94
(0)	

Date of inspection 6/14/84 Time start //50 Ti	me finish // 15
Name of inspector Lofet Sana	
Company name K. S. Processing Co.	•
Location 201 E. Tanta St.	•
county Delange Municipality Marga	
'Identification number PAD 988 691 737	
Name of responsible official Kurt Scheuermann	
Title President	
Mailing address 201 E. 10th St., Marcus Hoof, P.	A - 19061
Area code and phone no. 215-474-4606	
Name of person interviewed Edward Scheuers	
Title V. P.	
Mailing address (if different from above)	
Area code and phone no	
# PA	
1. a. PA hazardous waste transporter (HWT) license number AH So	<u> </u>
b. Expiration date 7/23/8×	
2. Hazardous waste handling: \( \square\) N/A	
a. 🔊 Blending, 🌅 mixing	
b. Storage, Ttreatment, disposal	
c.  Use,  reuse,  recycle,  reclaim	S. Care Co. S. Level 1 1 1 1 1 1
3. Does the transporter generate hazardous wastes? 2 Yes 7 No	
4. Types of hazardous waste produced by Hazardous Waste Number:	JUN 2 6 1904
U220	View
U231	
5. Are hazardous wastes transported into the Commonwealth from abo	road? // Yes // No

ors - Part B

v. D.

, •	•		Mark Stranger	X.S Processing Co								
•	•	New York	•	1- NON-COMPLIANCE, Z-COMPLIANCE, 3-NOT APPLICABLE, 4-NOT DETERMINED								
	<u> </u>	3	4	REQUIREMENT	75.26							
. [	-	7	+	Identification number								
-	V	7		Company licensed by PA DER . (c								
	V			Copy of license kept on vehicles transporting hazardous wastes . (c								
	7			Licenses transporting only wastes conditioned on the license . (c								
1	7			Manifest accompanies all shipments	(d)							
	7			Required number of copies of the manifest accompanies shipment	(d) (d)							
			4	Shipmonts comply with U.S. and PA DOF requirements	(0) (9)							
			v	Entire quantity as stated on the manifest delivered	(4) (9)							
		7		Undeliverable shipment procedures followed	(a) (1							
	·	7		Normal in-transit storage of waste (only if specified on the manifest)	(e) (2							
	7			Records retained at designated location (f								
-	1			Contingency plan approved and implemented (g								
•	V		_	Appropriate and adequate safety equipment carried on transport vehicle	(h) (2							
		~	,	Equipment decontamination procedures followed	(h) (2							
•	_	V		Contaminated washwater, waste solutions, residues disposed of in accordance with regulations	(16) (7							
	V	-		Sufficient absorbent material in vehicle when transporting liquids in containers of 100 gallons or less.	(11)+							
	0	F		Training program								
-												
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### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL RESOURCES



Ridley Creek State Park
Sycamore Mills Road
Media, PA , 19063

Mr. Kurt Scheuermann K. S. Processing Company 201 East Tenth Street Marcus Hook, PA 19061

OCT | 1983

DIV. OF HAZARDOUS RE: Hazardous Waste I.D. /PA098069173

#### NOTICE OF VIOLATION

October 7,

Dear Mr. Scheuermann:

The Commonwealth of Pennsylvania, Department of Environmental Resources ("Department") recently reviewed manifest document No. PAA4499040, a shipment of 312 pounds of hazardous waste (U220) from Medical College of Virginia. Your Company, which holds hazardous waste transporter license No. PA-AHS003, was indicated as Transporter No. 1 on the manifest.

The Department's review of manifest document No. PAA 4499040 indicated that the manifest violates Act 97, Section 403, for the following reason:

Your authorized representative falled to sign and certify the receipt of the shipment as required in Ch. 75.263(d)(2)(i).

You are hereby notified of the existence of the violation described above. In order to comply with the rules and regulations, the Department requests that you submit to the Department by October 12, 1983, a properly certified copy of the manifest.

This letter does not waive, either expressly or by implication, the authority of the Commonwealth of Pennsylvania to initiate any civil or criminal actions for any and all violations of law arising prior to or after the issuance of this letter or for the violations referred to in this letter. This letter shall not be construed so as to waive or impair any rights of the Department of Environmental Resources heretofore or hereafter existing.

If you have any questions concerning this matter, please feel free to contact me at 565-1687.

Truly yours,

Robert Zang Solid Waste Specialist

cc: George Danyliw
Medical College of Virginia
Solid and Hazardous Waste
Leon Kuchinski

R-SWM-51
ie cover sheet for instructions
ease TYPE or PRINT clearly using
pall point pen-PRESS HARD

### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL RESOURCES

NRT A:	MA	NIF	EST D	OCL	ME	NT N	10. F	PA A	44	<u>98</u>	10	<u>40</u>		
NAME SITE ADDRESS					PHONE NO. EPA I.D. NO.									
ollege of Virgina	Chmund, V	st BoxII	280	4-	786-9	131	Υ <sub>ι</sub>	ĄΤ	00	00	7,9	8	6	45
S. Processing Co Ma	reus Hook	Pa.	21	57	4944	64	PI	4.6	),9	80	6.9	1	Z	3.7
ANSPORTER NO 2 (IF ANY)					·			1		L.L.J		1		
EATMENT, STORAGE OR S. 20 POSAL (TSD) FACILITY (O WA	rcus Hook	Pa.	21	<u>ح</u>		160	P	FIL	29	80	6,9	ıL	<u>.</u> 2	2رً
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3ENERATOR'S CERTIFICATION. Tr ind are in proper condition for transpo vastes described above were consigned termit to do so. I certify that the forest	to the transporter named.	. The TSD Facili	itv can	and	will accept	nillind	Trans	porta ent o	tion, f haz	Kagad, n U S EP ardous v	vaste, e <del>varust</del> e	and I	has :	Valid
Honelet your		abSpecie	1157		Sept	1	41	98	3	SEPECTION IN	DAFE	YAL	0/4	Č Č Č
TE RECEIVED TRANSPOR	TER NO 1 SIGNATURE AND SHIPMENT	CERTIFICATION	OF		RANSPORTI NO. 1 H.W. ID (License	T		R/		A	AS	0	Q	3
197 - 1905 Mai Short D	COPY	Disposer &	State -	Mall	d PYON	The last			此為	<b>"大"</b>	det			, \$;

RECORD OF	PHONE CALL DISCUSSION FIELD THIP DONNERSING
COMMUNICATION	OTHER (SPECIFY)
	(Record of item checked above)
Jame Cassidy	Fig V (614-462-8383) DATE 11/21/83.  Pig V (614-462-8383) 9:48 Am
	1 / 4 (6/4-462-8383) 9.48 AM
K-S Processing (PAO-	98-069-1737) Marcus Hook: Pa.
TUBELARY OF COMMUNICATION	
25-55 Gol drums of	Toleune in scintillation poles
left Ohr. State Univ	Dia S.W. Kurley Co lined
p Lewisvelle, Ky. (B.B	3. Roberts 502-245-1484) went t
Beltsville, That 6/6/83.	Waste will be shipped to
K-S Processing Mar	rus Host la (215-494-4606)
the franciated per	Manifest. Mr. adelsberger want
K track down warte.	K-S [Rocessing is listed as
Hen- Trans only not	TSP Darelity Jan Rotenberg
explained process at f	acility Ulm sent Mr. Adelsherger
Copy of complete fel	

CONCLUSIONS, ACTION TAKEN OF PEQUIRED

### k. L. - PROCELLING CO.

All Mail - Box 471 - Moorestown, New Jersey - 08057 - Facilities 201 West 10th Street Marcus Hook, Pa. 19061 Phone 215-494-4606

PAD 980691737

-APR DD 1985

April 18/83

Department of Environmental Resources Solid Waste Dept.

Answers to

Hazardous Waste Instection Report

Generators Part C

- 1. Enclosed new notification of hazardous waste activity.
- 2. We have daily processing reports, showing the number of drums being processed. We have quarterly reports showing quantities received.
- 3. DESCRIPTIONS and DISPOSITIONS

We receive used liquid scintillation vials of the excempt variety, from medical resaerch laboratories, (used in drug research only) for recycling. EPA waste # DOO1.

Shipping papers and certification (signed by authorized personnel) from each generator or shipper are available, for every shipment we receive.

4. We have applied for a hazardous waste transporters license, with DER in Harrisburg, March 22.1983.

Rurt Schedermann, Pres.

V-220 ander

### BUREAU OF SOLID WASTE MANAGEMENT

WR-SWM-53: Rev. 3/82 NOTIFICATION O	F HAZARDUUS	WASIE ACII	VIII		
I INSTALLATION'S EPA I.D. NUMBER					
FA D 9 8 G6 9 17 3 7	The said the said the said	- Capper	Tegra de Artik		
II. NAME OF INSTALLATION				TOTAL STATE OF THE	
K.S. PROCESSING CO.			;	ARR 2	10,1983
III INSTALLATION MAILING ADDRESS	e de la companya de	Z FOR VIEW PREZ PAR			
STREET OR P. O. BOX					
P.O. Box 471				•	
		2007 de			
CITY OR TOWN					ZIP CODE
MOORESTOWN			ingstrangland o <del>r salawa</del> n	N J 080	057
IV LOCATION OF INSTALLATION					
STREET OR ROUTE NUMBER				MUNICIPALIT	Υ
201 East 10th Steet			MARCUS	HOOK	
- PPA(() CITY OR TOWN () per () ()	ST.	ZIP CODE	sangy mytr Card	COUNTY	the state of the s
MARCUS HOOK	PA	19061	D	ELAWARE	for fig. 1. Jun 3. 1.
V INSTALLATION CONTACT					
HAME AND TITLE (lest, first, &				PHONEN	o. feree code & no.)
SCHEUERMANN KURT PRESIDENT	n	Costinio manta a provincia de la companya del companya de la compa		2 1 5 4	94460
VI OWNERSHIP					
	FINSTALLATION	SIRGAL CWNF			
	MATALLATION	·			
SCHEUERMANN KURT					
B. TYPE OF OWNERSHIP			Villa (W.		
(enter the appropriate letter into box)					
F = FEDERAL M = NON-FEDERAL				48.	
VII SIC CODES (4-digit in order of priority)					
A. FIRST 122 (Second	Elektrica de la comp	eniger of a	C. THIR	D V	William Colored State Colored
REUSE RECYCLE, STORAGE		(specify)			
B. SECOND			D. FOU	RTH	Variation and the
(pecify)		(Specify)			
VIII TYPE OF HAZARDOUS WASTE ACTIVITY				ace enterior and	usis de la
A. GENERATION A TORE		RTATION			LE, RECLAIM
		TEITERIXE			A TECHNICAL
B. TREAT	P, PERMIT	YRULE	ж.	OTHER (specify)	<b>)</b> }
IX MODE OF TRANSPORTATION (transporters only)					and the starte
A. AIR & B. RAIL W. Y C. HIGHWAY	D. WATER	À 🔲 É. OTHE	re (specify) \$		
X EXISTING ENVIRONMENTAL PROGRAM PERMITS				Average in the	
A. NPDES (Discharges to Surface Water) D. PSD (Air Emiss	ians from Proposed	Sources,			
B. UIC (Underground Injection of Fluids) E.	SOLID WASTE				
C. RCRA (Hazardous Wastes)	5 07115	<del></del>			24
C. High (maxifolds wastes)	F. OTHER	<del></del>	(specify)	<u> </u>	Var Automotive and
			ZIEV II. VII. III.	V Driverson	
XI. TYPE OF NOTIFICATION,					A CONTRACTOR OF THE SECOND
Mark "X" in appropriate box to indicate whether this is your	installation's first r	notification of ha	zardous waste	ectivity, or notifi	cation of a chance of
general information, hazardous weste handled, of hazardous waste TIONS).	activity. If you ch	eck B, C, D, E, o	r F, attach a le	tter of explanati	on ISEE INSTRUC
1 7	LETION OF A WA	STE	E.	DELETION OF	AN ACTIVITY
	DDITION OF A WA		<del></del>	ADDITION OF	

XII DESCRIPTION OF HAZA	RDOUS WAST	ES (Continued	from fron	d and						CHECK COST
A. HAZARDOUS WASTES F	ROM NON—SP your installation	ECIFIC SOUI handles. Use	RCES, Ente	er the four—di sheets if nece	git number seary.	from 575	.261(h)(2) <u>1</u>	or each liste	d hozardou	Wasta
	<b>1 2 3</b>		3		4		5		<b>6</b>	
	8 7 7		9		. 10 . e.z.		11		. 12	
B. HAZARDOUS WASTES FI									vaste from s	pecific
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79 144	20		21	- 22	22		23		24:	
25	264% ha		27		28		29		30	
C. COMMERCIAL CHEMICA your installation handles w								for each ch	mical subst	ence
21	32		33		34		35		36	
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43	44	=	45		46	• • • • • • • • • • • • • • • • • • •	47		48	
D. CHARACTERISTICS OF N	illation handles.				ne boxes cr	orrespondin	g to the chem	cteristics o	non—listed	
1. IGNITABL	Services	2 00	RROSIVE			REACTIV	/E		EP TOX	
XIII CERTIFICATION		ali Kajires	10.00	e Contact	A . (4	Partin Vis	A SEE W		经验品额	
I certify under penalty of attached documents, and I believe that the submit submitting false informat	of law that I' that based outed information, including	have person n my inquin ion is true, n the possib	ally exam y of thos accurate, ilility of	nined and a se individual , and comp fine and in	m familia s immedi lete. I a nprisonm		e informati consible fo that there	on submit r obtainin are signi	ted in thing the infinite infi	and all ormation, alties for
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. DESCRIPTION OF	HAZARDOUS WAS	TES (continued from	front	· I to Brown States of the control of the	9.9. •
HAZARDOUS WASTES				m 40 CFR Part 261.31 f	or each listed hazardous
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HAZARDOUS WASTES specific industrial source	s your installation hand	es. Use additional sheet	s if necessary.	FR Part 261.32 for each	listed hazardous waste fr
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CHARACTERISTICS OF	NON-LISTED HAZA	RDOUS WASTES Mark	C"X" in the boxes corr	esponding to the charge	23 - 26
hazardous wastes your in					
📆 1. IGNITAI	ELE [	2. CORROSIVE	☐3. REA	CTIVE	X4. TOXIC
(D001)	(P	002)	(D003)		(D000)
CERTIFICATION					
certify under penalty	of law that I have	personally examined	and am familiar wi	th the informatio <mark>n s</mark> u	bmitted in this and a
ttached documents, as believe that the subm	nd that based on my	inquiry of those ind	lividuals immediatel	y responsible for obto	gining the information
nitting false informatio	n, including the poss	irue, accurate, and c ibility of fine and imp	ompiete. I am awar orisonment.	e that there are signif	icant penaities for sub
SNATURE			ICIAL TITLE (type or	print)	DATE SIGNED
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	/	I VOLT. 20	CHEUERMANN,	LUTOINENI.	MARCH 24/19
Just Ho	heuwmen		,		1

<b>⊕EPA</b>	U.S. ENVIRONMENTAL PROTECTION AGENCY NOTIFICATION OF HAZARDOUS WASTE ACTIVITY	INSTRUCTIONS: If you received a preprinted						
INSTALLA- TION'S EPA		label, affix it in the space at left. If any of the information on the label is incorrect, draw a line						
I.D. NO.		through it and supply the correct information in the appropriate section below. If the label is						
1. STALLATION		complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted label complete all items "Installation" masses						
INSTALLA- TION II. MAILING	PLEACE DIACE LA DEL INTRUCCOA CE	label, complete all items. "Installation" means a single site where hazardous waste is generated,						
ADDRESS	PLEASE PLACE LABEL IN THIS SPACE	treated, stored and/or disposed of, or a trans- porter's principal place of business. Please refer						
		to the INSTRUCTIONS FOR FILING NOTIFI- CATION before completing this form. The						
LOCATION III OF INSTAL- LATION		information requested herein is required by law (Section 3010 of the Resource Conservation and						
		Recovery Act).						
FOR OFFICIAL U	SE ONLY							
	COMMENTS							
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4 M O C R E		3057						
III. LOCATION O	F INSTALLATION	- 51						
	STREET OR ROUTE NUMBER							
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M A R	US HOCK PA	9041						
IV. INSTALLATION	ON CONTACT							
SCHEUER	MANN KURT PRESIDENT	PHONE NO. (area code & no.)						
2   Spite de la	HAMI KURE TRUSTOBAT	45 46 - 49 49 - 51 52 - 56						
V. OWNERSHIP	A. NAME OF INSTALLATION'S LEGAL OWNER							
8 K U R T	SCHEUICRMANN							
15 16 B TYPE OF O	WNERSHIP TYPE OF HAZARDOUS WASTE ACTIVITY	outer "V" in the engagement is it is a facility						
(enter the appropria		TRANSPORTATION (complete item VII)						
F = FEDERAL M = NON-FED	M WYYY YYYYY	. UNDERGROUND INJECTION						
VII MODE OF TH	RANSPORTATION (transporters only – enter "X" in the appropriate							
A. AIR		R (specify):						
61	62 63 64 65							
Mark "X" in the appr	UBSEQUENT NOTIFICATION  opriate box to indicate whether this is your installation's first notification of ha	ezardous waste activity or a subsequent notification.						
If this is not your firs	t notification, enter your Installation's EPA I.D. Number in the space provided	below.						
		C. INSTALLATION'S EPA I.D. NO.						
A. FIRST	NOTIFICATION	<sup>2m c)</sup> P AD 98 0 69 17 3 7						
	OF HAZARDOUS WASTES							
Please go to the rever	se of this form and provide the requested information.							

# B. S. - PROCESSING CO. INC. 71 - Moorestown, New Jersey - 08057 -

FACILITIES, 201 W. 10th STREET, MARCUS HOOK, PENNSYLVANIA 19061 Phone 215-494-4606

Miss. Sherly Bulkin Air and Waste Management Div. U.S. EPA, Region III 6th and Walnut Street Philadelphia, Pa. 19106

Dear Miss Bulkin,

In reference to our telephone conversation of Jan. 3.1983, enclosed please find the EPA notification form (# 8700-12) and the information you requested.

We have relocated our processing facilities to Marcus Hook, Pennsylvania and changed our company name to K.S. Processing CO. Inc.

It is my understanding that we will receive a new EPA ID number in place of the two previous ones. We will use the new number for transporting and all other dealings as a reuse recycle facility.

Sincerely,

Kurt Scheuermann, President

CELLD SEÇT

CONTINUE ON DEVENCE

	<b>≎EPA</b>	u.s. NOTIFICAT	ENVIRONMENTAL PRO ION OF HAZARD	OUS WASTE	CTIVITY	INSTRUCTIONS: If you received a preprinted
	INSTALLA- TION'S EPA	`				label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information
	I. STALLATION					in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted
	INSTALLA- TION II. MAILING ADDRESS	PLEA	SE PLACE LABE	L IN THIS SPA	CE	label, complete all items. "Installation" means a single site where hazardous waste is generated treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFI
	LOCATION III OF INSTAL- LATION					CATION before completing this form. The information requested herein is required by law (Section 3010 of the Resource Conservation and Recovery Act).
¥ H O	FOR OFFICIAL	USE ONLY	_			3 g '+ ¥
ADETACH	C 15 16			OMMENTS		53
		ION'S EPA I.D. NUM	BER APPROVED	(yr., mo., & day	, D	
	FPAD98	072130	2 1	285168	22	
	I. NAME OF INS PROCES	STALLATION STALLATION				
	II. INSTALLATI	ON MAILING AD	DRESS STREET OR P.O. BOX			
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۱	III. LOCATION	OF INSTALLATION	ET OR ROUTE NUMBE	R	•	
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-	IV. INSTALLAT		NO TITLE (lost first &		1 6	PHONE NO. (area code & no.)
	2 KU/27	SCHEYLE	RMAMU P	REPIDE	MTII	215.945.8844
<	V. OWNERSHIP		A. NAME OF INSTA	LLATION'S LEGAL	OWNER	
DETACH	8 KURT	SCHEW OWNERSHIP	ERMAMM	D D O US W CET	A CTIVITY (	55 (1V'') is also see a second of the second
4	(enter the appropr	OWNERSHIP iate letter into box)	A. GENER			rnter "X" in the appropriate box(es)) TRANSPORTATION (complete item VII)
	F = FEDERA M = NON-FE	1711	C. TREAT	/STORE/DISPOSE	□ p.	UNDERGROUND INJECTION
	VII. MODE OF	TRANSPORTATIO	N (transporters only	- enter "X" in th	e appropriate	box(es))
1	A. AIR	B. RAIL	C. HIGHWAY	D. WATER	E. OTHE	R (specify):
		SUBSEQUENT NO		installation's first ne	otification of ha	zardous waste activity or a subsequent notification.
			your Installation's EPA			pelow.
	🛛 A. FIRST	NOTIFICATION	B. SUBSEQUE	ENT NOTIFICATIO	N (complete ite	m C) C. INSTALLATION'S EPA I.D. NO.
		ON OF HAZARDO erse of this form and	US WASTES provide the requested in	formation.		Section 1.

				I.D FOR	OFFICIAL USE ONLY
				w II.	
IX. DESCRIPTION OF HA	ZARDOUS WAST	ES (continued from	front)		- 13 14
A. HAZARDOUS WASTES FR waste from non-specific so	OM NON-SPECIFIC	C SOURCES. Enter the	four-digit number from	40 CFR Part 261.31	for each listed hazardous
1	2	3	4	5	6
0001	23 - 26	23 - 28	23 - 26	23 - 26	23 - 26
		hin	11		12
23 - 26	23 26	23 - 26	23 - 26	23 - 26	23 - 26
B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four—digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.					
1 13	1 14	15	16	17	18
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
		. <del>                                     </del>	<del>                                     </del>		<del>                                     </del>
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
		Hiirl			
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four—digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.					
31	32	33	34	35	36
23 - 26	23 - 26	23 - 26	23 • 26	23 - 26	23 - 26
37	38	39	40	41	42
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
	111	45	1 1 1	47	<del>    1                                  </del>
23 • 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
D. LISTED INFECTIOUS WAS hospitals, medical and resear	ch laboratories your	installation handles. Us			ste from hospitals, veterina
	50	51	52		
E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24.)					
nazardous wastes your install	ation nandles. (See 4	40 CFH Parts 201.21	201.24.)		
⊠1. IGNITABLE (D001)		2. CORROSIVE	3. REAC (D003)	TIVE	(D000)
X. CERTIFICATION			•		
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and ai attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for sub-					
mitting false information, including the possibility of fine and imprisonment.					
SIGNATURE		l l	FICIAL TITLE (type or )		DATE SIGNED
1/201/khen	cermain	& KURT	SCHELLERMA	WN-Pres.	June 22/80
EPA Form 8700-12 (6-80) RE	VERSE				1



# UNITED STATES ENVIRONMENTAL PROTECTION AGENCY WASHINGTON, D.C. 20460 OFFICE OF SOLID WASTE

27 16 BB

Mr. Tom Garth
Process - Tech. Inc.
P.O. Box 471
Moorestown, NJ 08057

OFFICE OF SOLID WASTE AND EMERGENCY RESPONSE

Dear Mr. Garth:

I am writing in response to your telephone request for clarification of several aspects of EPA's hazardous waste management regulations (40 CFR Part 261).

Your first question was whether used scintillation cocktails are regulated as an ignitable waste (D001) or as a spent solvent (F005). According to the information I was able to find, toluene serves, in this application, as a carrier or dispersant and not as a true solvent. Thus, the used cocktails should be considered to be ignitable wastes (D001). Also, since the used scintillation cocktails are not "listed wastes" their recycling or reuse is regulated under the provisions of 40 CFR 261.6(a) and not (b).

As to your second question, in calculating the quantity of waste for purposes of determining whether or not one is a small quantity generator, the weight of the container is not included. The operative factor is the weight of actual waste.

Your final question dealt with whether material which is a radioactive by-product and thus falls under Nuclear Regulatory Act control but which is released from NRC or state regulation becomes subject to RCRA control. It is our interpretation of the provisions of 40 CFR 261.4(a)(4) that such wastes are exempt from RCRA control even if the waste meets one or more characteristics of a hazardous waste.

I hope this clarification is sufficient to clear up any questions you or your customers may have.

Sincerely,

David Friedman

David Friedman Manager

Waste Analysis Program
Hazardous & Industrial Waste Division (WH-565)

### k. L. — PROCELLING CO. INC.

All Mail - Box 471 - Moorestown, New Jersey - 08057 FACTLITIES, 201 W. 10th STREET, MARCUS HOOK, PENNSYLVANIA 19061 Phone 215-494-4606
EPA ID # PAD 980721 302

U.S. EPA Region III
Air and Waste Management Div.
6th and Walnut Street
Philadelphia, Pa. 19106
Attn. Sherly Bulkin

Dec. 30.1982

This letter is to inform you that we will be using our EPA ID number for transporting and for manifesting as a reuse recycle facility in the state of Pennsylvania, as suggested by DER Harrisburg, Pa.

Sincerely,

Kurt Schedermann, President

PECEIVED

A PERMITS & PESTIGIDES SECT

·.

JAN 3 1983

EPA, R3



ER-SWM-53: Rev. 3/82

### BUREAU OF SOLID WASTE MANAGEMENT NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

INSTALLATION'S EPA I.D. NUMBER	
RAD960691737	
II NAME OF INSTALLATION	
K. S. PROCESSING CO. IN	NU.
III INSTALLATION MAILING ADDRESS	
STREET OR P. O. BOX	
Р.О. вох 471	
CITY OR TOWN	ST. ZIP CODE
MOODECHALAI	N J 08057
MOORESTOWN  IV LOCATION OF INSTALLATION	
STREET OR ROUTE NUMBER	MUNICIPALITY
201 West 10th Street	Marcus Hook
CITY OR TOWN	ST. ZIP CODE COUNTY
Marcus Hook	P A 19061 Delaware
V. INSTALLATION CONTACT	
MAME AND TITLE (last, first; & job title)	PHONE NO. fares code & no.
Cohanayaan Kuut Daagida	
Scheuermann Kurt Preside	
	ATIONS LEGAL OWNER
Scheuermann Kurt	
B. TYPE OF OWNERSHIP	
(enter the appropriate letter into box)	왕왕왕 왕동아 전 왕동아 그렇게는 함께를 들고 말하고 그렇게 되었다. 역일부 등에
F = FEDERAL M = NON-FEDERAL M	
VII SIC CODES (4-digit in order of priority)	
A. FIRST	C, THIRD
(specify) Reuse - Recycling	(specify)
B. SECOND	D. FOURTH
(specify)	(specify)
VIIL TYPE OF HAZARDOUS WASTE ACTIVITY	
D. TREAT D. DISPOSE P. PE  IX MODE OF TRANSPORTATION (transporters only)	OMPLETE ITEM IX)  RMIT BY RULE  H. OTHER (specify):
A. AIR B. RAIL C. HIGHWAY D. W.	TER E. OTHER (specify):
X EXISTING ENVIRONMENTAL PROGRAM PERMITS	NAME OF THE PARTY
A. NPDES (Discharges to Surface Water) D. PSD (Air Emissions from F	Proposed Sources R A FERMITS & F.S S SECT
<u> </u>	LAN 9 2000
B. UIC (Underground Injection of Fluids) E. SOLID WA	ASTE JAN 3 1983
C: RCRA (Hazardous Wastes) F. OTHER	lapacity) T
	NONE
XI. TYPE OF NOTIFICATION,	
	s first notification of hazardous waste activity, or notification of a change of
general information, hazardous waste handled, or hazardous waste activity. If TIONS).  A. FIRST NOTIFICATION  C. DELETION OF B. CHANGE OF GENERAL INFORMATION  D. ADDITION OF B. CHANGE OF GENERAL INFORMATION	FA WASTE  E. DELETION OF AN ACTIVITY

EPA. R3

Trease printed type to	ith ELTTE type (12 characters/inch/ in the unshaded areas		03A 140, 0240-EFA-01			
<b>⊕EPA</b>	U.S. ENVIRONMENTAL PROTECTION AG NOTIFICATION OF HAZARDOUS WAST		INSTRUCTIONS: If you received a preprinted			
INSTALLA- TION'S EPA			label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information			
I.D. NO.			in the appropriate section below. If the label is complete and correct, leave Items I, II, and III			
I. STALLATION			below blank. If you did not receive a preprinted label, complete all items, "Installation" means a			
TION II. MAILING ADDRESS	PLEASE PLACE LABEL IN THIS S	PACE	single site where hazardous waste is generated, treated, stored and/or disposed of, or a trans-			
ADDICESS			porter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFI-			
LOCATION			CATION before completing this form. The information requested herein is required by law			
LATION			(Section 3010 of the Resource Conservation and Recovery Act).			
FOR OFFICIAL U	SE ONLY					
6	COMMENTS					
C						
INSTALLATION'S EPA I.D. NUMBER APPROVED DATE RECEIVED (yr., mo., & day)						
FPAD9	713491111 8308	OD	o ogv			
1. NAME OF INST						
K S. Pro						
II. INSTALLATIO	N MAILING ADDRESS STREET OR P.O. BOX					
3 P.O. Box	471					
15 16	CITY OR TOWN	ST. ZIF	-SODE			
4 Moores	10 w n	NJOS	057			
III. LOCATION OF						
STREET OR ROUTE NUMBER  5 1 606 E Manning BIVd						
S 1606 E Manning BIVa						
6 Levitt	0 4 10	PAIG	057			
IV. INSTALLATIO		A0 A1 A2 A7	- 51			
cirili	NAME AND TITLE (last, first, & job title)		PHONE NO. (area code & no.)			
15 16	Irmann Kurt Presid	ent	12 1 5 9 4 5 8 4 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5			
V. OWNERSHIP	A. NAME OF INSTALLATION'S LE	GAL OWNER				
8 Kurt S	cheuermann					
B. TYPE OF OV (enter the appropriate	VNERSHIP PLEETER (NEW YORK) VI. TYPE OF HAZARDOUS WAS	TE ACTIVITY (e.	nter "X" in the appropriate box(es)			
F = FEDERAL	A. GENERATION	□ B. ·	TRANSPORTATION (complete item VII)			
M = NON-FEDE	56 59		UNDERGROUND INJECTION			
A. AIR	ANSPORTATION (transporters only – enter "X" in $\Box$ B. RAIL $\Box$ C. HIGHWAY $\Box$ D. WATE					
61	UBSEQUENT NOTIFICATION	65				
Mark "X" in the appro	priate box to indicate whether this is your installation's fin- notification, enter your Installation's EPA I.D. Number in					
The time is not your tiret	notineation, enter your installation's EFA 1,D. Number in	rue share hinained p	C. INSTALLATION'S EPA I.D. NO.			
	OTIFICATION B. SUBSEQUENT NOTIFICA	TION (complete iten				
	OF HAZARDOUS WASTES					

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					S W		7/A C		
IX DES	CRIPTION OF HAZ	ARDOUS WAS	TES (continued from	front)	1 2		3 14 15		
IX. DESCRIPTION OF HAZARDOUS WASTES (continued from front)  A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.									
	1	2	3	4.	5	6			
	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	. •		
:	23 26	23 26	23 26	23 - 26	23 26	23 : 26			
B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four—digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.									
i.	13	14	15	16	17	18 '			
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				r the four—digit number f dditional sheets if necessar		.33 for each chemical	sub-		
	31	32	33	34	35	36			
Kalendary, king S	25 26	23 26	25 26	23 - 26	23 28	23 - 26			
	37	38	39	40	41	42			
	23 26	23 26	23 26	23 26	23 - 26	23 - 26			
	43	111	45	46	47	48			
D. LISTE	D INFECTIOUS WAST	ES. Enter the fou	r-digit number from 40	23 26 CFR Part 261.34 for eac	h listed hazardous wa	ste from hospitals, vet	erinary		
				se additional sheets if nec					
	49	50	51	52	53	54			
	26	23 26	23 26	23 2 26	23 26	23 - 26			
			40 CFR Parts 261.21 —	k "X" in the boxes corres 261.24.)	ponding to the chara	eteristics of non-listed			
	1. IGNITABLE		2. CORROSIVE	☐3. REAC (D003)	TIVE	4. TOXIC (D000)			
X. CERT	TIFICATION								
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.									
SIGNATU	RE		NAME & OF	FICIAL TITLE (type or p	rint)	DATE SIGNED			
Edwar	dR Scheu	lrmann	Edward	Scheuermann	Vice Pre	58/3/82			
EPA Form 8700-12 (6-80) REVERSE									

I.D. - FOR OFFICIAL USE ONLY



Aug.
We have a duplicate 
L. S-Bracessing -2 numbers exist

Same location: PAD 98 069 1737 - Keep)

PAD 98 071 2491

the activity from 2491 needs to be Transferred to 1737.

Delete 2491 and if there is any inspection. Report data etc. under this number, please. Replace it under 1737



This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

INSTALLATION ADDRESS

PAD 98 071 2491

K S Processing Company

P.O. Box 471

Moorestown, NJ 08057

Attn: Mr. Kurt Scheuermann, President

1606 E. Manning Blvd.

Levittown, PA 19057

R.S. Processing Co.

PAD 980712491

Subsequent notification

to Process Nich 
PAD 984972-1302

and +50 to signineDoes he also write a

Nome change?



This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

PAD 98 069 1737

K.S. Processing Company P.O. Box 471 Moorestown, NJ 08057

Attn: Kurt Scheuermann

INSTALLATION ADDRESS

201 E. 10th Street Marcus Hook, PA 19061



This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

PAD 98 069 1737

KS Processing, Inc.
P.O. Box 471
Moorestown, NJ 08057
Attn: Kurt Scheuermann

201 W. 10th Street
Marcus Hook, PA 19061



This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

PAD 98 072 1302

Process-Tech P.O. Box 471 Moorestown, NJ 08057

INSTALLATION ADDRESS

1606 E. Manning Blvd. Levittown, PA 19057



This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

PAD 98 071 2491

Kurt Scheuermann, Pres. KS Processing Inc. P.O. Box 471 Moorestown, NJ 08057

INSTALLATION ADDRESS

201 W. 10th St. Marcus Hook, PA 19061